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20150 7590 08/08/2007
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William Chinn (Depositor's name)
[Signature] (Signature)
October 18, 2007 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/403,174	10/18/1999	PETER RUDLOFF	016072-000600US	6937

TITLE OF INVENTION: SYSTEM AND METHOD FOR IDENTIFYING AND AUTHENTICATING ACCESSORIES, AUXILIARY AGENTS AND/OR FUELS FOR TECHNICAL APPARATUS

APPL. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$0	\$700	11/08/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS			
ST CYR, DANIEL		2876	235-494000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Townsend and Townsend and Crew LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Kabushiki Kaisha Hitachi Seisakusho
 (Hitachi, Ltd.)

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Tokyo, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- ☐ A check is enclosed.
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☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 201430 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

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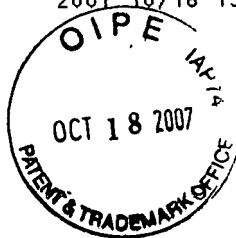
J. George Seka

Date October 18, 2007

Registration No. 24,491

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Atty Docket No. 016072-000600US

PTO FAX NO.: 1-571-273-2885

ATTENTION:

Examiner Daniel St Cyr

Group Art Unit 2876

**OFFICIAL COMMUNICATION
FOR THE PERSONAL ATTENTION OF
EXAMINER Daniel St Cyr**

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following documents in re Application of PETER RUDLOFF, Application No. 09/403,174, filed October 18, 1999 for SYSTEM AND METHOD FOR IDENTIFYING AND AUTHENTICATING ACCESSORIES, AUXILIARY AND/OR OPERATING SUBSTANCES FOR ITEMS OF EQUIPMENT are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. FTOL-85 Part B - Fees Transmittal
2. Copy of PTOL-85 Part B - Fees Transmittal

Number of pages being transmitted, including this page: 3

Dated: October 18, 2007


William Chinn

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